

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation League of Conservation Voters, Inc.		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L St NW Suite 800		
(c) City, State and ZIP Code Washington DC 20036-		3. FEC Identification Number
2. Occupation and Name of Employer (for Individual Filers Only)		C C90005786

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report ☒ 24-Hour Report

☐ October 15 Quarterly Report ☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

Patrick Collins

Patrick Collins

08/29/2014

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
League of Conservation Voters, Inc.

Date of Public Distribution/Dissemination

MM / DD / YYYY
07 / 09 / 2014Mailing Address 1920 L St NW
Ste 800

Amount

12.96

Transaction ID : A07BA46D4D0614CCA900

Purpose of Expenditure
Staff Time for LetterCategory/
TypeOffice Sought: ☐ House State: NH
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Scott BrownCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 1512.96Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
League of Conservation Voters, Inc.

Date of Public Distribution/Dissemination

MM / DD / YYYY
07 / 21 / 2014Mailing Address 1920 L St NW
Ste 800

Amount

6.48

Transaction ID : AFF401B6E91B5497CBFC

Purpose of Expenditure
Staff Time for Press ReleaseCategory/
TypeOffice Sought: ☐ House State: NH
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Scott BrownCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 1519.44Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
League of Conservation Voters, Inc.

Date of Public Distribution/Dissemination

MM / DD / YYYY
08 / 29 / 2014Mailing Address 1920 L St NW
Ste 800

Amount

19.44

Transaction ID : A169EEFDF4A5447B5B9D

Purpose of Expenditure
Staff Time for Press ReleaseCategory/
TypeOffice Sought: ☐ House State: NH
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Scott BrownCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 3038.88Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 38.88

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Public Policy Polling

Date of Public Distribution/Dissemination

MM / DD / YYYY
08 / 29 / 2014

Mailing Address 2912 Highwoods Blvd

Amount

City State Zip Code
Raleigh NC 27604-1064

1500.00

Transaction ID : AFED4466E4B004204BF2

Purpose of Expenditure
PollingCategory/
TypeOffice Sought: ☐ House State: NH
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Scott BrownCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 3038.88Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 1500.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 1538.88
(carry total from last page forward to Line 7)